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Bib Data Sheet

CONFIRMATION NO. 3366

SERIAL NUMBER 10/052,705	FILING DATE 01/16/2002 RULE	CLASS 083	GROUP ART UNIT 3724	ATTORNEY DOCKET NO. SDT 321
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 09/676,190 09/29/2000
 and is a CIP of 09/929,221 08/13/2001
 and is a CIP of 09/929,226 08/13/2001 PAT 6,920,814
 and is a CIP of 09/929,227 08/13/2001
 and is a CIP of 09/929,234 08/13/2001
 and is a CIP of 09/929,235 08/13/2001
 and is a CIP of 09/929,236 08/13/2001 ABN
 and is a CIP of 09/929,237 08/13/2001
 and is a CIP of 09/929,238 08/13/2001
 and is a CIP of 09/929,240 08/13/2001
 and is a CIP of 09/929,241 08/13/2001
 and is a CIP of 09/929,242 08/13/2001
 and is a CIP of 09/929,244 08/13/2001 PAT 6,857,345
 and is a CIP of 09/929,425 08/13/2001
 and is a CIP of 09/929,426 08/13/2001
 and claims benefit of 60/270,011 02/20/2001
 and claims benefit of 60/270,941 02/22/2001
 and claims benefit of 60/270,942 02/22/2001
 and claims benefit of 60/273,177 03/02/2001
 and claims benefit of 60/273,178 03/02/2001

**** FOREIGN APPLICATIONS *******

NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

**** 02/06/2002**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 13	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examiner's Signature Gharsem Ali	Initials JA		
Verified and Acknowledged				

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TITLE
Table saw with improved safety system

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